



United States Environmental Protection Agency
Washington, D.C. 20460

Water Compliance Inspection Report

Section A: National Data System Coding (i.e., PCS)

Transaction Code	NPDES	yy/mm/dd	Inspection Type	Inspector	Fac Type
1 <input type="text" value="N"/> 2 <input type="text" value=""/>	3 <input type="text" value="MER04125"/>	11 12 <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="0"/>	17 18 <input type="text" value="R"/>	19 <input type="text" value="R"/>	20 <input type="text" value="1"/>
Inspection Type Description					
<input type="text" value="MS4 Recon during Maine Healthy Beaches Sampling event supported by Region 1 labs"/>					
Remarks					
21 <input type="text" value=""/>					
Inspection Work Days Facility Self-Monitoring Evaluation Rating B1 QA Reserved					
67 <input type="text" value="1"/> <input type="text" value="0"/> 69 70 <input type="text" value=""/> 71 <input type="text" value=""/> 72 <input type="text" value=""/> 73 <input type="text" value=""/> 74 75 <input type="text" value=""/> 80					

Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) DPW 1 Portland Avenue (physical 103 Smithwheel Road) Old Orchard Beach, ME 04064	Entry Time/Date 9/10/2012 830	Permit Effective Date n/a
	Exit Time/Date 9/10/2012 1400	Permit Expiration Date n/a
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) William Robertson, Director of Public Works 207 934-2250	Other Facility Data	
Name, Address of responsible Official/Title/Phone and Fax Number. same as above		
Contacted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Section C: Areas Evaluated During Inspection (Check only those areas evaluated)

<input type="checkbox"/> Permit	<input type="checkbox"/> Self-Monitoring Program	<input type="checkbox"/> Pretreatment	<input checked="" type="checkbox"/> MS4
<input checked="" type="checkbox"/> Records/Reports	<input type="checkbox"/> Compliance Schedules	<input type="checkbox"/> Pollution Prevention	
<input checked="" type="checkbox"/> Facility Site Review	<input type="checkbox"/> Laboratory	<input checked="" type="checkbox"/> Storm Water	
<input checked="" type="checkbox"/> Effluent/Receiving Waters	<input type="checkbox"/> Operations & Maintenance	<input type="checkbox"/> Combined Sewer Overflow	
<input type="checkbox"/> Flow Measurement	<input type="checkbox"/> Sludge Handling/Disposal	<input type="checkbox"/> Sanitary Sewer Overflow	

Section D: Summary of Findings/Comments (Attach additional sheets of narrative and checklists as necessary)

SEV Codes	SEV Description
<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	
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<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	
Name(s) and Signature(s) of Inspector(s) Alex Rosenberg	
Agency/Office/Phone and Fax Numbers 8-1709	
Date 9/26/2012	
Signature of Management QA Reviewer	
Agency/Office/Phone and Fax Numbers	
Date	

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